

## Add/Delete Authorized Agents/Representatives Motor Vehicle Dealer, Manufacturer, Transporter & Distributor License Plates

Your Company's Twelve-Digit (12) MVD Issued Permanent ID #	County Where Company Is Located	Business Phone # Including Area Code	
In accordance with § 40-2-38 OCGA, I am adding or deleting authorized agents for the license plate(s) issued for motor vehicles manufactured, distributed, sold, transported or leased.	Current Master Tag Number		Year of Issue
Legal Name of Company, Business or Firm	D/B/A (Name of Company, Business or Firm under which you do business)		
Street Address	City	State	Zip Code
Mailing Address (if different from street address)	City	State	Zip Code

### ADD Agents/Representatives

Enter agents' full legal names as shown on their valid Georgia driver's license or Georgia identification card and their position with the company. Each authorized agent/representative must sign.

Printed Name of Agent to Add	Signature	Date	Position
Printed Name of Agent to Add	Signature	Date	Position
Printed Name of Agent to Add	Signature	Date	Position
Printed Name of Agent to Add	Signature	Date	Position
Printed Name of Agent to Add	Signature	Date	Position
Printed Name of Person Authorized to Complete Form		Signature of Person Authorized to Complete Form	
		Date	

### DELETE Agents/Representatives

Agents/Representatives no longer authorized to act as an agent or representative of the Company/Business/Firm

Printed Name of Agent to Delete	Date Deleted	Signature of Agent Authorizing Change
Printed Name of Agent to Delete	Date Deleted	Signature of Agent Authorizing Change
Printed Name of Agent to Delete	Date Deleted	Signature of Agent Authorizing Change
Printed Name of Agent to Delete	Date Deleted	Signature of Agent Authorizing Change
Printed Name of Agent to Delete	Date Deleted	Signature of Agent Authorizing Change

By signing this form to add or delete authorized agents of the company/business/firm recorded above, I swear, affirm or certify under criminal penalty of a felony for fraudulent use of a false or fictitious name or address or making a material false statement punishable by a fine of up to \$5,000 or by imprisonment of up to five-years (5), or both, that statements contained on documents submitted by me or authorized agents/representatives are true and accurate. I also swear, affirm or certify that I am an authorized agent of the company listed above and all requirements of this state's laws have been met (i.e. Sales Tax, Motor Vehicle, Fire Marshal's Office, Secretary of State, etc.).

### Mailing Address

ATTN: Special Tags Unit  
Dept. of Revenue/Motor Vehicle Division  
PO Box 740381  
ATLANTA, GA 30374-0381

If you need additional information or forms, please call (404) 675-4947 or access our web site at: [www.dor.ga.gov](http://www.dor.ga.gov). From our web site, most tag and/or title forms can be completed electronically completed and printed for signing and submission.